Docket No.

5771**-P1-**I-BD

Declaration and Power of Attorney For Patent Application

English Language Declaration

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

TREATMENT OF SEXUAL DYSFUNCTION

	the:	specification of which	ı					
1115 1115 117	(ch€	eck one)						
	\boxtimes	is attached hereto.						
		was filed on		Inited States	Application No.	or PCT International		
		Application Number						
		and was amended o	วท					
					(if applicable)			
	I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.							
	I acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, Section 1.56.							
	of ar appliden	ny foreign application(lication which designa itified below, by check	n(s) for patent or invaled at least one co king the box, any fo	ventor's certif ountry other t oreign applica	ficate, or Section 365(a)	sted below and have also or's certificate or PCT		
	Prio	r Foreign Applications	S			Priority Not Claimed		
-	(Nur	mber)	(Country)		(Day/Month/Year Filed)			
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60/133,355	May 10, 1999	
(Application Serial No.)	(Filing Date)	
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

POWER OF ATTORINEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (list name and registration number) Charles W. Ashbrook 27,610 Darryl C. Little 40,703 Evan J. Federman 37,060 J. Trevor Lumb 28,567 Suzanne M. Harvey 42,640 Francis J. Tinney 33,069 David R. Kurlandsky 41,505 Linda Vag 32,071 Send Correspondence to: Warner-Lambert Company 2800 Plymouth Road Ann Arbor, Michigan 48105 Direct Telephone Calls to: (name and telephone number) Full name of sole or first inventor Maria Isabel GONZALEZ Sole or first inventor signature Date M: Who Gotals 02/01/01 Residence Cambridge, CB1 2BX Citizenship Spain Post Office Address 55 Saint Barnabas Road, Cambridge, CBI 2BX, United Kingdom Full name of sole or second inventor Robert Denham PINNOCK Sole or second inventor signature Date 02/01/01 Residence Cambridge CBI 9YT Citizenship **United Kingdom** 3, Teasel Way, Cambridge CB1 9YT, United Kingdom

Page 4 of 4

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